

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Majority PAC			FEC IDENTIFICATION NUMBER ▼ C C00484642		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>		
Full Name of Payee Mission Control, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2014		
Mailing Address 114A Mansfield Hollow Rd			Amount 30719.45		
City Mansfield Center		State CT	Zip Code 06250-1316		Transaction ID : VN7GB9WXE26
Purpose of Expenditure Direct Mail - Estimate		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Joni Ernst			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: IA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Mission Control, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014		
Mailing Address 114A Mansfield Hollow Rd			Amount 20696.82		
City Mansfield Center		State CT	Zip Code 06250-1316		Transaction ID : VN7GB9WQ2D0
Purpose of Expenditure Direct Mail - Estimate		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Joni Ernst			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: IA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			51416.27		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Rebecca Lambe			Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> 10 / 17 / 2014		

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NAME OF COMMITTEE (In Full) Senate Majority PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484642 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Ourso Beychok Johnson, Inc.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">16</div> <div style="border: 1px solid black; padding: 2px;">2014</div> </div>	
Mailing Address 352 Napoleon St		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">24500.00</div>	
City State Zip Code Baton Rouge LA 70802-5939	Transaction ID : VN7GB9WQ2C2 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;"></div> <div style="border: 1px solid black; padding: 2px;"></div> <div style="border: 1px solid black; padding: 2px;"></div> </div>		
Purpose of Expenditure Direct Mail - Estimate	Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Thomas Cotton	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4068979.61</div>		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AR Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Ourso Beychok Johnson, Inc.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">17</div> <div style="border: 1px solid black; padding: 2px;">2014</div> </div>	
Mailing Address 352 Napoleon St		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">18000.00</div>	
City State Zip Code Baton Rouge LA 70802-5939	Transaction ID : VN7GB9WXA01 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;"></div> <div style="border: 1px solid black; padding: 2px;"></div> <div style="border: 1px solid black; padding: 2px;"></div> </div>		
Purpose of Expenditure Direct Mail - Estimate	Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Thomas Cotton	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4068979.61</div>		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AR Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">42500.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Rebecca Lambe

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Date

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17

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Signature

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Ralston Lapp Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 1054 31st St NW Ste 430		Amount 1303.10	
City Washington	State DC	Zip Code 20007-6042	Transaction ID : VN7GB9WXYD4
Purpose of Expenditure Media Production Costs - Estimate		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Cory Gardner		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 3113084.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Ralston Lapp Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 1054 31st St NW Ste 430		Amount 1107.85	
City Washington	State DC	Zip Code 20007-6042	Transaction ID : VN7GB9WXE00
Purpose of Expenditure Media Production Costs - Estimate		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Cory Gardner		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 3113084.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2410.95
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Rebecca Lambe

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Well & Lighthouse, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 1244 19th St NW		Amount 160016.00	
City Washington	State DC	Zip Code 20036-6618	Transaction ID : VN7GB9WQ215
Purpose of Expenditure Online Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Cory Gardner		<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Well & Lighthouse, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 1244 19th St NW		Amount 50000.00	
City Washington	State DC	Zip Code 20036-6618	Transaction ID : VN7GB9WQ223
Purpose of Expenditure Online Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Cory Gardner		<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	210016.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	306343.22

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Rebecca Lambe

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Date

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10 / 17 / 2014

Signature